

Fill in this information to identify your case:

United States Bankruptcy Court for the:

WESTERN DISTRICT OF NORTH CAROLINA

Case number (if known) Chapter 11

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/20

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	Quantum Development Charlotte, LLC	
2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names		
3. Debtor's federal Employer Identification Number (EIN)	45-4418463	
4. Debtor's address	Principal place of business 2001 Hartwicke Place Charlotte, NC 28270 Number, Street, City, State & ZIP Code Mecklenburg County	Mailing address, if different from principal place of business P.O. Box, Number, Street, City, State & ZIP Code Location of principal assets, if different from principal place of business Number, Street, City, State & ZIP Code
5. Debtor's website (URL)		
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify:	

Debtor **Quantum Development Charlotte, LLC**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
 See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7
☐ Chapter 9

☒ Chapter 11. Check **all** that apply:

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,725,625. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11**. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

Debtor **Quantum Development Charlotte, LLC** Case number (if known) _____
Name

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?
- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor _____ Relationship _____
District _____ When _____ Case number, if known _____

11. Why is the case filed in this district?
- Check all that apply:
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?
- ☒ No
☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention?** (Check all that apply.)
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard? _____
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other _____
- Where is the property?** _____
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☐ Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds
- Check one:
- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- ☒ 1-49
☐ 50-99
☐ 100-199
☐ 200-999
- ☐ 1,000-5,000
☐ 5001-10,000
☐ 10,001-25,000
- ☐ 25,001-50,000
☐ 50,001-100,000
☐ More than 100,000

15. Estimated Assets
- ☒ \$0 - \$50,000
☐ \$50,001 - \$100,000
☐ \$100,001 - \$500,000
☐ \$500,001 - \$1 million
- ☐ \$1,000,001 - \$10 million
☐ \$10,000,001 - \$50 million
☐ \$50,000,001 - \$100 million
☐ \$100,000,001 - \$500 million
- ☐ \$500,000,001 - \$1 billion
☐ \$1,000,000,001 - \$10 billion
☐ \$10,000,000,001 - \$50 billion
☐ More than \$50 billion

16. Estimated liabilities
- ☐ \$0 - \$50,000
☒ \$1,000,001 - \$10 million
☐ \$500,000,001 - \$1 billion

Debtor	Quantum Development Charlotte, LLC	Case number (if known)	
Name			
<input type="checkbox"/> \$50,001 - \$100,000	<input type="checkbox"/> \$10,000,001 - \$50 million	<input type="checkbox"/> \$1,000,000,001 - \$10 billion	
<input type="checkbox"/> \$100,001 - \$500,000	<input type="checkbox"/> \$50,000,001 - \$100 million	<input type="checkbox"/> \$10,000,000,001 - \$50 billion	
<input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> More than \$50 billion	

Debtor **Quantum Development Charlotte, LLC**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **March 15, 2022**
MM / DD / YYYY

X /s/ Richard D. Campbell
Signature of authorized representative of debtor

Title **Member/Manager**

Richard D. Campbell
Printed name

18. Signature of attorney

X /s/ R. Keith Johnson
Signature of attorney for debtor

Date **March 15, 2022**
MM / DD / YYYY

R. Keith Johnson
Printed name

Law Offices of R. Keith Johnson, P.A.
Firm name

1275 S. Hwy. 16
Stanley, NC 28164
Number, Street, City, State & ZIP Code

Contact phone **704-827-4200**

Email address **kjparalegal@bellsouth.net**

8840 NC
Bar number and State

Fill in this information to identify the case:

Debtor name Quantum Development Charlotte, LLC

United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule* _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 15, 2022

X /s/ Richard D. Campbell

Signature of individual signing on behalf of debtor

Richard D. Campbell

Printed name

Member/Manager

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Quantum Development Charlotte, LLC**
 United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**
 Case number (if known): _____

☐ Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Diesel Business Capital, LLC 88 Pine St. New York, NY 10005			Contingent Unliquidated Disputed			\$39,339.60
Edens (PRSC Holdings) PO Box 536856 Atlanta, GA 30353		Debt of East 1511 - Property at 4271 Park Road; Lease terminates 2024				\$40,000.00
Emerald Group Holdings, LLC 48 Wall St., 10th Floor New York, NY 10005			Contingent Unliquidated Disputed			\$30,324.57
Employers PO Box 539003 Henderson, NV 89053						\$3,321.00
Fiji Funding, LLC c/o Yehuda Jay Klein, Esq. The Klein Law Firm 3180 18th St. San Francisco, CA 94110			Contingent Unliquidated Disputed			\$73,113.00
Flash Funding 4000 Hollywood Blvd. Hollywood, FL 33021			Contingent Unliquidated Disputed			\$91,420.44
Funding Metrics 1330 Ave. of the Americas, Ste. 23A New York, NY 10019			Contingent Unliquidated Disputed			\$80,343.78

Debtor **Quantum Development Charlotte, LLC**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Internal Revenue Service 320 Federal Place Greensboro, NC 27401						\$630,000.00
Jewell Agency 18 Sunrise Point Ct. Lake Wylie, SC 29710						\$11,000.00
Koury Corporation Attn: Doug Heberle, Esq. 2275 Vanatory St., Ste. 200 Greensboro, NC 27403		Debt of Toringdon 1511 and Arboretum 1511 - (Toringdon) Property at 12330 Johnston Rd.; Lease terminates 2030; (Arboretum) 12206 Copper Way; Lease ter				\$106,800.00
Metro Capital, LLC 600 Center St. Herndon, VA 20170			Contingent Unliquidated Disputed			\$124,443.15
MP Shopping Center c/o Southern Real Estate 4201 Congress St., Ste. #170 Charlotte, NC 28209		Debt of Mooresville 1511 - Property at 120-D Market Place Avenue; Lease terminates 2029				\$13,230.85
NC Department of Revenue P. O. Box 25000 Raleigh, NC 27640						\$360,000.00
Oilmatic 521 Eagleton Downs Dr., Ste. A Pineville, NC 28134		Debt of East 1511				\$3,363.01
United Health Care PO Box 94017 Palatine, IL 60094						\$8,941.76
US Foods PO Box 602292 Charlotte, NC 28260		Debt of Toringdon 1511				\$24,873.28
US Foods PO Box 602292 Charlotte, NC 28260		Debt of Mooresville 1511				\$18,786.76
US Foods PO Box 602292 Charlotte, NC 28260		Debt of East 1511				\$53,201.77

Debtor **Quantum Development Charlotte, LLC**
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Velocity Capital Group 333 Pearsall Ave., Ste. 105 Cedarhurst, NY 11516			Contingent Unliquidated Disputed			\$67,048.00
Wilmar, Inc. PO Box 221272 Charlotte, NC 28222		Debt of Quantum Development Corp.				\$5,257.93

Fill in this information to identify the case:

Debtor name Quantum Development Charlotte, LLC

United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*..... \$ **0.00**

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ **38,317.01**

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ **38,317.01**

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **218,400.00**

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **990,000.00**

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **809,992.97**

4. **Total liabilities**
Lines 2 + 3a + 3b

\$ **2,018,392.97**

Case number (if known)

Best Case Bankruptcy

Fill in this information to identify the case:

Debtor name **Quantum Development Charlotte, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount	
2.1	<p>Priority creditor's name and mailing address</p> <p>Internal Revenue Service 320 Federal Place Greensboro, NC 27401</p> <p>Date or dates debt was incurred Various</p> <p>Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$630,000.00	\$630,000.00
2.2	<p>Priority creditor's name and mailing address</p> <p>Iredell Co. Tax Collector P. O. Box 1027 Statesville, NC 28687</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00	\$0.00

Debtor	Quantum Development Charlotte, LLC	Case number (if known)
	<small>Name</small>	

2.3	Priority creditor's name and mailing address Mecklenburg County Tax Collector 3205 Freedom Dr., #3000 Charlotte, NC 28208	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address NC Department of Revenue P. O. Box 25000 Raleigh, NC 27640	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$360,000.00	\$360,000.00
	Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim
--	--	--	------------------------

3.1	Nonpriority creditor's name and mailing address Arc3 Gases 518 W. 24th St. Charlotte, NC 28206 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Mooresville 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$386.00
-----	--	--	----------

3.2	Nonpriority creditor's name and mailing address BenefitBay 13750 Millard Ave., Ste. 100 Omaha, NE 68137 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
-----	---	--	----------

3.3	Nonpriority creditor's name and mailing address Diesel Business Capital, LLC 88 Pine St. New York, NY 10005 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39,339.60
-----	---	---	-------------

Debtor	Quantum Development Charlotte, LLC Name _____	Case number (if known) _____
--------	---	------------------------------

3.4	Nonpriority creditor's name and mailing address DS1 Phone Systems 13500 Crystal Springs Dr. Huntersville, NC 28078 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$558.68 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Mooresville 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address Edens (PRSC Holdings) PO Box 536856 Atlanta, GA 30353 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$40,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of East 1511 - Property at 4271 Park Road; Lease terminates 2024</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address Emerald Group Holdings, LLC 48 Wall St., 10th Floor New York, NY 10005 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$30,324.57 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address Employers PO Box 539003 Henderson, NV 89053 Date(s) debt was incurred _____ Last 4 digits of account number <u>0005</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,321.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address Fiji Funding, LLC c/o Yehuda Jay Klein, Esq. The Klein Law Firm 3180 18th St. San Francisco, CA 94110 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$73,113.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address Flash Funding 4000 Hollywood Blvd. Hollywood, FL 33021 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$91,420.44 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address Freshpoint 1200 Oakley Industrial Blvd., Ste. B Fairburn, GA 30213 Date(s) debt was incurred _____ Last 4 digits of account number <u>7444</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,508.71 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of East 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Quantum Development Charlotte, LLC Name	Case number (if known) _____
--------	---	------------------------------

3.11	Nonpriority creditor's name and mailing address Freshpoint 1200 Oakley Industrial Blvd., Ste. B Fairburn, GA 30213 Date(s) debt was incurred _____ Last 4 digits of account number <u>7442</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Mooresville 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,833.89
------	---	--	-------------------

3.12	Nonpriority creditor's name and mailing address Freshpoint 1200 Oakley Industrial Blvd., Ste. B Fairburn, GA 30213 Date(s) debt was incurred _____ Last 4 digits of account number <u>8663</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Toringdon 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,227.83
------	---	--	-------------------

3.13	Nonpriority creditor's name and mailing address Funding Metrics 1330 Ave. of the Americas, Ste. 23A New York, NY 10019 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$80,343.78
------	---	---	--------------------

3.14	Nonpriority creditor's name and mailing address Huneycutt 3840 Matthews Indian Trail Rd., Ste. 2 Matthews, NC 28104 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of East 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
------	--	---	----------------

3.15	Nonpriority creditor's name and mailing address Huneycutt 3840 Matthews Indian Trail Rd., Ste. 2 Matthews, NC 28104 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Mooresville 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
------	--	--	----------------

3.16	Nonpriority creditor's name and mailing address Huneycutt 3840 Matthews Indian Trail Rd., Ste. 2 Matthews, NC 28104 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Toringdon 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
------	--	--	----------------

3.17	Nonpriority creditor's name and mailing address Insurance Office of America 1221 Bower Pkwy., Ste. 101 Columbia, SC 29212 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
------	--	--	----------------

Debtor	Quantum Development Charlotte, LLC Name	Case number (if known) _____
--------	---	------------------------------

3.18	Nonpriority creditor's name and mailing address Jewell Agency 18 Sunrise Point Ct. Lake Wylie, SC 29710 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.19	Nonpriority creditor's name and mailing address Koury Corporation Attn: Doug Heberle, Esq. 2275 Vanatory St., Ste. 200 Greensboro, NC 27403 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$106,800.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Toringdon 1511 and Arboretum 1511 - (Toringdon) Property at 12330 Johnston Rd.; Lease terminates 2030; (Arboretum) 12206 Copper Way; Lease terminates 2031</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.20	Nonpriority creditor's name and mailing address Loomis Insurance PO Box 14354 Reading, PA 19612 Date(s) debt was incurred _____ Last 4 digits of account number <u>0289</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$771.27 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.21	Nonpriority creditor's name and mailing address Metro Capital, LLC 600 Center St. Herndon, VA 20170 Date(s) debt was incurred _____ Last 4 digits of account number <u>2993</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$124,443.15 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.22	Nonpriority creditor's name and mailing address MP Shopping Center c/o Southern Real Estate 4201 Congress St., Ste. #170 Charlotte, NC 28209 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$13,230.85 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Mooresville 1511 - Property at 120-D Market Place Avenue; Lease terminates 2029</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.23	Nonpriority creditor's name and mailing address O'Keefe Group (TOG) PO Box 1240 Attleboro, MA 02703 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,025.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of East 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

3.24	Nonpriority creditor's name and mailing address Oilmatic 521 Eagleton Downs Dr., Ste. A Pineville, NC 28134 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,363.01 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of East 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	--

Debtor	Quantum Development Charlotte, LLC Name _____	Case number (if known) _____
--------	---	------------------------------

3.25	Nonpriority creditor's name and mailing address Penn National Insurance 2 North Second St. Harrisburg, PA 17101 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
------	--	--	----------------

3.26	Nonpriority creditor's name and mailing address Postec 1125 Northmeadow Pkwy., Ste. 114 Roswell, GA 30076 Date(s) debt was incurred _____ Last 4 digits of account number <u>3621</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Mooresville 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,598.74
------	--	--	-------------------

3.27	Nonpriority creditor's name and mailing address Principal Life Insurance PO Box 77202 Minneapolis, MN 55480 Date(s) debt was incurred _____ Last 4 digits of account number <u>5483</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$454.60
------	--	--	-----------------

3.28	Nonpriority creditor's name and mailing address ProChef PO Box 4057 Mooresville, NC 28117 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Toringdon 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$623.68
------	--	--	-----------------

3.29	Nonpriority creditor's name and mailing address Restaurant Depot 2030 John Crosland Dr. Charlotte, NC 28208 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Toringdon 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$505.06
------	--	--	-----------------

3.30	Nonpriority creditor's name and mailing address RHK Recovery Group (Day & Nite) 1670 Old Country Rd., Ste. 202 Plainview, NY 11803 Date(s) debt was incurred _____ Last 4 digits of account number <u>0257</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Stonecrest 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,390.61
------	---	---	-------------------

3.31	Nonpriority creditor's name and mailing address United Health Care PO Box 94017 Palatine, IL 60094 Date(s) debt was incurred _____ Last 4 digits of account number <u>2563</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,941.76
------	---	--	-------------------

Debtor	Quantum Development Charlotte, LLC Name	Case number (if known) _____
--------	---	------------------------------

3.32	Nonpriority creditor's name and mailing address US Foods PO Box 602292 Charlotte, NC 28260 Date(s) debt was incurred _____ Last 4 digits of account number <u>9736</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of East 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$53,201.77
3.33	Nonpriority creditor's name and mailing address US Foods PO Box 602292 Charlotte, NC 28260 Date(s) debt was incurred _____ Last 4 digits of account number <u>2228</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Mooresville 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,786.76
3.34	Nonpriority creditor's name and mailing address US Foods PO Box 602292 Charlotte, NC 28260 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Toringdon 1511</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,873.28
3.35	Nonpriority creditor's name and mailing address Velocity Capital Group 333 Pearsall Ave., Ste. 105 Cedarhurst, NY 11516 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67,048.00
3.36	Nonpriority creditor's name and mailing address Wilmar, Inc. PO Box 221272 Charlotte, NC 28222 Date(s) debt was incurred _____ Last 4 digits of account number <u>2639</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Debt of Quantum Development Corp.</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,257.93

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Edens Limited Partners 1221 Main St., Ste. 1000 Columbia, SC 29201	Line <u>3.5</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	Edens PRSC Holdings, LLC 1100 Abernathy Rd., NE Ste. 875 ATTN: LEGAL DEPT Atlanta, GA 30353-6856	Line <u>3.5</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

Debtor **Quantum Development Charlotte, LLC**
Name

Case number (if known)

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 990,000.00
5b.	+ \$ 809,992.97
5c.	\$ 1,799,992.97

Fill in this information to identify the case:

Debtor name **Quantum Development Charlotte, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Property at 4271 Park Rd.**

State the term remaining **Lease terminates 2024**

List the contract number of any government contract _____

**Edens (PRSC Holdings)
PO Box 536856
Atlanta, GA 30353**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Property at 12330 Johnston Rd.**

State the term remaining **Lease terminates 2030**

List the contract number of any government contract _____

**Koury Corporation
Attn: Doug Heberle, Esq.
2275 Vanatory St., Ste. 200
Greensboro, NC 27403**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Property at 12206 Copper Way**

State the term remaining **Lease terminates 2031**

List the contract number of any government contract _____

**Koury Corporation
Attn: Doug Heberle, Esq.
2275 Vanatory St., Ste. 200
Greensboro, NC 27403**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Property at 120-D Market Place Ave.**

State the term remaining **Lease terminates 2029**

List the contract number of any government contract _____

**MP Shopping Center
c/o Southern Real Estate
4201 Congress St., Ste. #170
Charlotte, NC 28209**

Fill in this information to identify the case:

Debtor name **Quantum Development Charlotte, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Richard D. Campbell** **2001 Hartwicke Pl. Charlotte, NC 28270**

Woodforest National Bank

☒ D **2.1**
☐ E/F _____
☐ G _____

2.2 **Richard D. Campbell** **2001 Hartwicke Pl. Charlotte, NC 28270**

Internal Revenue Service

☐ D _____
☒ E/F **2.1**
☐ G _____

2.3 **Richard D. Campbell** **2001 Hartwicke Pl. Charlotte, NC 28270**

NC Department of Revenue

☐ D _____
☒ E/F **2.4**
☐ G _____

2.4 **Richard D. Campbell** **2001 Hartwicke Pl. Charlotte, NC 28270**

Diesel

☐ D _____
☒ E/F **3.3**
☐ G _____

2.5 **Richard D. Campbell** **2001 Hartwicke Pl. Charlotte, NC 28270**

Emerald Group Holdings, LLC

☐ D _____
☒ E/F **3.6**
☐ G _____

Debtor **Quantum Development Charlotte, LLC**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6	Richard D. Campbell	2001 Hartwicke Pl. Charlotte, NC 28270	Fiji Funding, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.8</u> <input type="checkbox"/> G _____
-----	----------------------------	---	--------------------------	--

2.7	Richard D. Campbell	2001 Hartwicke Pl. Charlotte, NC 28270	Flash Funding	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.9</u> <input type="checkbox"/> G _____
-----	----------------------------	---	----------------------	--

2.8	Richard D. Campbell	2001 Hartwicke Pl. Charlotte, NC 28270	Funding Metrics	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.13</u> <input type="checkbox"/> G _____
-----	----------------------------	---	------------------------	---

2.9	Richard D. Campbell	2001 Hartwicke Pl. Charlotte, NC 28270	Metro Capital, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.21</u> <input type="checkbox"/> G _____
-----	----------------------------	---	---------------------------	---

2.10	Richard D. Campbell	2001 Hartwicke Pl. Charlotte, NC 28270	Velocity Capital Group	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.35</u> <input type="checkbox"/> G _____
------	----------------------------	---	-------------------------------	---

**United States Bankruptcy Court
Western District of North Carolina**

In re **Quantum Development Charlotte, LLC**

Debtor(s)

Case No.

Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Richard D. Campbell 2001 Hartwicke Pl. Charlotte, NC 28270	Member		95.4%

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Member/Manager** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **March 15, 2022**

Signature **/s/ Richard D. Campbell**
Richard D. Campbell

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
Western District of North Carolina**

In re **Quantum Development Charlotte, LLC**

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the Member/Manager of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **March 15, 2022**

/s/ Richard D. Campbell

Richard D. Campbell/Member/Manager

Signer/Title

Arc3 Gases
518 W. 24th St.
Charlotte, NC 28206

BenefitBay
13750 Millard Ave., Ste. 100
Omaha, NE 68137

Diesel
Business Capital, LLC
88 Pine St.
New York, NY 10005

DS1 Phone Systems
13500 Crystal Springs Dr.
Huntersville, NC 28078

Edens (PRSC Holdings)
PO Box 536856
Atlanta, GA 30353

Edens Limited Partners
1221 Main St., Ste. 1000
Columbia, SC 29201

Edens PRSC Holdings, LLC
1100 Abernathy Rd., NE
Ste. 875
ATTN: LEGAL DEPT
Atlanta, GA 30353-6856

Emerald Group Holdings, LLC
48 Wall St., 10th Floor
New York, NY 10005

Employers
PO Box 539003
Henderson, NV 89053

Fiji Funding, LLC
c/o Yehuda Jay Klein, Esq.
The Klein Law Firm
3180 18th St.
San Francisco, CA 94110

Flash Funding
4000 Hollywood Blvd.
Hollywood, FL 33021

Freshpoint
1200 Oakley Industrial Blvd., Ste. B
Fairburn, GA 30213

Funding Metrics
1330 Ave. of the Americas, Ste. 23A
New York, NY 10019

Huneycutt
3840 Matthews Indian Trail Rd., Ste. 2
Matthews, NC 28104

Insurance Office of America
1221 Bower Pkwy., Ste. 101
Columbia, SC 29212

Internal Revenue Service
320 Federal Place
Greensboro, NC 27401

Iredell Co. Tax Collector
P. O. Box 1027
Statesville, NC 28687

Jewell Agency
18 Sunrise Point Ct.
Lake Wylie, SC 29710

Koury Corporation
Attn: Doug Heberle, Esq.
2275 Vanatory St., Ste. 200
Greensboro, NC 27403

Loomis Insurance
PO Box 14354
Reading, PA 19612

Mecklenburg County Tax Collector
3205 Freedom Dr., #3000
Charlotte, NC 28208

Metro Capital, LLC
600 Center St.
Herndon, VA 20170

MP Shopping Center
c/o Southern Real Estate
4201 Congress St., Ste. #170
Charlotte, NC 28209

NC Department of Revenue
P. O. Box 25000
Raleigh, NC 27640

O'Keefe Group (TOG)
PO Box 1240
Attleboro, MA 02703

Oilmatic
521 Eagleton Downs Dr., Ste. A
Pineville, NC 28134

Penn National Insurance
2 North Second St.
Harrisburg, PA 17101

Postec
1125 Northmeadow Pkwy., Ste. 114
Roswell, GA 30076

Principal Life Insurance
PO Box 77202
Minneapolis, MN 55480

ProChef
PO Box 4057
Mooresville, NC 28117

Restaurant Depot
2030 John Crosland Dr.
Charlotte, NC 28208

RHK Recovery Group (Day & Nite)
1670 Old Country Rd., Ste. 202
Plainview, NY 11803

Richard D. Campbell
2001 Hartwicke Pl.
Charlotte, NC 28270

United Health Care
PO Box 94017
Palatine, IL 60094

US Foods
PO Box 602292
Charlotte, NC 28260

Velocity Capital Group
333 Pearsall Ave., Ste. 105
Cedarhurst, NY 11516

Wilmar, Inc.
PO Box 221272
Charlotte, NC 28222

Woodforest National Bank
c/o Thomas L. Ogburn, III, Esq.
301 S. College St., Ste. 2900
Charlotte, NC 28202

**United States Bankruptcy Court
Western District of North Carolina**

In re **Quantum Development Charlotte, LLC**

Debtor(s)

Case No.
Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Quantum Development Charlotte, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

March 15, 2022

Date

/s/ R. Keith Johnson

R. Keith Johnson

Signature of Attorney or Litigant

Counsel for **Quantum Development Charlotte, LLC**

Law Offices of R. Keith Johnson, P.A.

1275 S. Hwy. 16

Stanley, NC 28164

704-827-4200 Fax: 704-827-4477

kjparalegal@bellsouth.net